**Anmol Dhillon**

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**Summary of Qualifications:**

* Over 7 years of extensive experience as Business Analyst with solid understanding of Business Requirement Gathering, Business Process Flow and Business Process Modeling.
* About 6 years of experience in Generating Test scripts for UAT
* Worked on HIPAA compliance and experience in designing the healthcare transactions to be HIPAA 5010 compliant
* Proficient in Power MHS,NASCO/ITS, AMISYS **benefit configuration**, testing benefit claims processing, pricing and authorizations
* Extensive experience on HealthCare Industry including supporting efforts including response to RFP, Requirements Analysis Documentation, General System Design and Detailed System Design Documentation, conducting JAD and JAR sessions of project life cycle
* Extensive knowledge of Object Oriented Analysis and Design (OOAD) using Unified Modeling Language (UML), Rational Unified Process (RUP), Waterfall model, Rational Rose, Requisite Pro, Rational Clear Case and MS Visio.
* Strong skills related to QNXT claims process, auditing, recovery, training, benefits analysis and customer service. Experienced with multiple payer applications including **AMISYS and FACETS and DIAMOND**.
* Experienced in interacting with business users and executives to identify their needs, gathering requirements and authoring Business Requirement Documents (BRD), Use Case Diagrams, Activity Diagrams and Sequence Diagrams using UML modeling.
* Strong skills related to QNXT claims process, auditing, recovery, training, benefits analysis and customer service.
* Knowledge of health care adjudication systems is required, specific knowledge of Amisys Advance, Power MHS, PowerSTEPP or MHC preferred
* Utilize detailed knowledge of **Amisys** to develop correct setup for billing, system affiliations, and contract intricacies for both clinic and practitioner level data.
* Experienced in facilitating and conducting Joint Application Development (JAD), Rapid Application Development (RAD) and Joint Requirement Planning (JRP) sessions, interviews, workshops and requirement elicitation sessions with end-users, clients, stakeholders and development team.
* Experienced in Business Analysis, SWOT Analysis, Gap Analysis, Cost-Benefit Analysis, Risk Analysis, Disaster Recovery Planning, Return On Investment (ROI) Analysis, Testing and Project Planning.
* Experienced in working with various departmental teams, developing interactive relationships with business and IT colleagues, having a thorough understanding of the constraints, needs, and perspectives of both the business users and the technical team.
* Experienced in training and mentoring team members with product knowledge and business processes.
* Strong work ethic, taking ownership of all duties and responsibilities and meeting management objectives.
* Strong business acumen, analytical, problem solving, interpersonal and presentation skills.
* Excellent written and oral communication skills to keep executive staff and team members apprised of goals, project status, and resolving issues and conflicts.

**Technical Competencies:**

**Business Skills:** Business Process Analysis & Design, Requirement Gathering, Use Case Modeling, JAD/JRP Sessions, Gap Analysis and Impact Analysis.

**Methodology:** RUP, Agile, OOAD and Waterfall.

**Standard and Codes:** HIPAA 4010A1/5010, ICD-10, ICD-9, ANSI X12, HL7, CPT and CMS form.

**Languages:** C, C++, SQL, PL/SQL, HTML and XML.

**Visual Modeling Tools:** Rational Rose, Requisite Pro, Clear Quest, Clear Case and MS Visio.

**Testing Tools:** HP Quality Center, Win Runner, Load Runner and TOAD

**Database:** Oracle 8i/9i/10g, DB2, MS SQL Server.

**Web Servers:** Microsoft Internet Information Server (IIS) 4.0/3.0, SunOne Server 5.2.

**Operating Systems:** UNIX, Windows 95/2000/NT/XP, and MS-DOS.

**Office tools:** MS Office 2003 (Word, Excel, Power Point, Outlook), MS Visio, MS Project, and MS FrontPage.

**Professional Experience:**

**State of Nebraska, Lincoln, NE Nov 13 - Present**

**Amisys Business Analyst**

My primary role on this project was working on conversion of ICD-9 CM and PCS codes to ICD-10 (Clinical Modification and Procedure Coding System) codes and conversion of all EDI HIPAA X12N-4010 transactions to HIPAA X12N-5010 version and prepares necessary supporting mapping/crosswalk documents as part of project deliverables

**Responsibilities:**

* Gathered Business requirements by driving user-group meetings and working with various global, cross-functional and virtual teams
* Assigned to Medicare project for Testing, verifying, documenting, and implementing application system software corrections/enhancements as released by AMISYS 6.0 for Providers as needed per Contract change and Maintenance.
* Recognized for significant contributions/achievements for leading the data conversion, monitoring, troubleshooting, and successful migration from PICK to **AMISYS** with immediate system efficiency.
* Conducted extensive analysis on migration and conversion of Provider and Member data, Group configurations, plan codes, benefit set-ups, fee schedules, provider pricing, capitation set-ups, etc from Legacy system (AIM) to QNXT.
* Responded to inquiries regarding plan benefits, claim payment and provider information.
* Verified thru reference and controls that code sets were **configured** correctly
* Responsible for gathering requirements from users in operations group and performing data mapping for the application, confirm and vacillating the requirement at time of BA testing.
* Designed and developed Use Cases, Activity Diagrams, Sequence Diagrams, OOD using UML
* Coordinated defects routing in the team and created Excel macros to generate daily defects report status from HP Quality Center across multiple teams.
* Used Rational Rose to model the process using UML to create behavioral and structural diagrams.
* Responsibilities included configuration and troubleshooting on MCS upgrade to **AMISYS** testing.
* Extensive experience in using collaborative tools like Mercury Quality Center to facilitate development across disparate teams
* Managed the Application Development efforts in support of the **Amisys** Claims and Billing system, in addition to Electronic Data Interchange processes.
* Prepared UAT Materials UAT Test Cases to include various steps involved for UAT and to have proper coverage of requirements
* Set up Standard & Non-Standard Contracts in **Amisys**, including new practitioner profiles, billing group practice numbers and provider affiliations.
* Developed test plans with QA team and helped to develop test plan, test cases and test scenarios using Mercury Test Director Tools for system testing, integration testing and performance testing
* Wrote test cases and test scripts for the User Acceptance Testing
* Examined, analyzed and model Test plans, Use Case Model cases & Test procedures based on RUP methodology.
* Plan documentation loading that included configuration of providers, contracts, and pricing on the **AMISYS** system
* Performed cost benefits analysis for the ICD-10 project.
* Created GSDs, BRDs, wrote test cases, documented defects using defect tracking tools and performed User Acceptance Testing.
* Documented and managed Business and System Requirements, to recommend business priorities along with options, **Risks and Cost Benefit Analysis** of solutions.
* Developed business relationships with vendors to partner/integrate software technologies, including the planning of conversion **to Amisys Advance**
* Collaborated with IT technical team to develop and implement cost reduction initiatives.
* Conducted JAD sessions to resolve project issues and synchronize different stakeholder's objectives.
* Used Facets Analytics for fast and easy retrieval, display and grouping of information for performing queries and generating reports.
* Created workflow scenarios, designed new process flows diagrams and documented the Business Process and various Business Scenarios and activities of the Business from the conceptual to procedural level.
* Extensive analysis on conversion of Claims, Members and Providers files from **Amisys into Facets**
* Created Flow diagrams for business processes using Microsoft Visio, analyzed and documented the requirement in Microsoft Excel and generated reports.
* Ensured the different reports generated as part of the HIPAA 5010 implementation met business rules and business requirements.
* Created and maintained the Requirement Traceability Matrix (RTM) between the requirements and other products such as design documents and test plans.

**Environment:** MS Office Suite, MS Visio, Java, J2EE TOAD, Mainframe, Oracle9I, SQL, HTML, XML, Mercury Quality Center 9.0, RUP, UML.

**M&T Bank, Buffalo, NY Sep 12 – Nov 13**

**Business Analyst**

M&T Bank is an [American](http://en.wikipedia.org/wiki/United_States)commercial bank that was founded in 1856 in western New York state, and is today headquartered in Buffalo at One M&T Plaza. Currently, M&T bank is using CLAS to book the Commercial and Business Banking loans. M&T Bank is replacing the CLAS with new booking application called Credit Path. This project called App 2 Book project. My project is to build Loan Origination System.

Another project is to implement the Microsoft CRM. Currently, M&T is using ERM as a customer relationship tool. This new project is replacing the current ERM system with new Microsoft CRM.

**Responsibilities:**

* Designed the business requirement collection approach based on the project scope and under waterfall SDLC methodology.
* Facilitated and managed meeting sessions with committee of SMEs from various business areas including Loan Monitoring, Asset Management, and Marketing.
* Conducted interviews with key business users to collect requirement and business process information.
* Participated in various stages of data and requirement analysis for project needs.
* Identified internal and external system requirements, design and configuration.
* Developed business requirement specification documents as well as high-level project plan. Designed and developed Use Cases, Activity Diagrams, Sequence Diagrams, using UML.
* Developed strategic partnerships with the business units to develop a solid knowledge base of the business line; including the business plan, products, and process and revenue streams.
* Documented and delivered Functional Specification Document to the project team.
* Collaborated with development architect and the business to develop both high-level and detailed application architecture to meet the business needs.
* Participated in the logical and physical design sessions, developed design documents.
* Assisted with user testing of systems, developing and maintaining quality procedures and ensuring that appropriate documentation is in place.
* Conducted User Acceptance Testing.
* Functioned as the primary liaison between the business line, operations, and the technical areas throughout the project cycle
* Partnered with the technical areas in the research and resolution of system and process problems.
* Analyzed research on operational procedures and methods and recommend changes for improvement – with an emphasis on automation and efficiency

**Herbalife, Torrance, CA Jan 11 – Aug 12**

**Project Manager**

Herbalife is a global nutrition company. Their products are sold exclusively through Herbalife independent distributors who conduct business in more than 75 countries. The purpose of this Project was to assist with costing for a SMS Global Project. The Project involved feature add-ons of an existing application and updating current systems to support the add-ons.

**Responsibilities:**

* Managed gathering of Functional & Non-Functional requirements from Business Stakeholders (Directors & Managers from Marketing, Finance, Risk Management), Business Users.
* Provide AGILE project management controls, project plans, timeline schedules, facilitate RAD sessions, and review software defects.
* Worked with the Scrum team and resolved impediment for the team.
* Used MS SharePoint as a central repository for all Project documentation and the communication of Project information.
* Developed business requirement specification documents as well as high-level project plan.
* Designed and developed Use Cases, Activity Diagrams, Sequence Diagrams, OOD using UML.
* Documented and delivered Functional Specification Document to the project team.
* Reviewed the Use cases & documented the Business Requirements & Business Rules.
* Developed Functional requirement Specification (FRS) with Process Flows, Wire Frames and Business Requirements.
* Created Portfolio review document by using Primavera Project Management.
* Involved in Different Kind of Testing like UAT, White Box Testing, Black Box Testing
* Authored User Acceptance Test scripts from approved requirements specification.
* Assisted with user testing of systems, developing and maintaining quality procedures, and ensuring that appropriate documentation is in place.
* Functioned as the primary liaison between the business line, operations, and the technical areas throughout the project life cycle.
* Performed task decomposition, delegated tasks and monitored project milestones using Prima Vera Project Management.

**CIGNA Healthcare, Greenwood Village, CO Sep 09 – Dec 10**

**Business Systems Analyst**

I worked under the project CAQH (Proclaim, CDB, EPRO, Facets) and also working on couple of more facets related projects like CDHP etc.We created functional requirements document for CAQH project. Once FRD was created then did analysis on Functional Requirements and create as well as update the mapping document. Currently the project is in testing phase and I am helping the Testing team for testing scenarios and writing queries for testing specific fields in the oracle database.

**Responsibilities:**

* Conducted weekly meetings for deciding the Policies and Procedures to be followed while gathering Functional Requirements.
* Extracted the Functional Requirements from the end users keeping in mind their need for the application and prepared Functional Requirement Documents (FRD) includes information of Functional Specification Document (FSD).
* Investigate to resolution extraordinary claim, eligibility, pricing, provider, **benefit**, third party liability, medical management/authorization and correspondence issues
* Preferred work experience as a Systems or Business Analyst. System knowledge of **Amisys** (Reflections) software.
* Identify process, workflow, **configuration** and system-related issues requiring improvements
* Performed the requirement analysis, impact analysis and documented the Analysis Result into mapping document.
* Wrote Test scenarios and test cases for testing the migration of EDI 4010 to 5010 and the processing of member enrollment and benefits, batch jobs corresponding to the claims (837) and real time transactions like 270/271/276/277.
* Participate with internal and external committees and **Amisys** user groups in collaboration with manager.
* Involved in requirement gathering and testing of consumer web portal for the enrollment of Medicare members.
* Develop and maintain long term projects to increase **Amisys** efficiency and accuracy**.**
* Worked on billing system a cash management module and enhanced the encrypting standards that are required for the application.
* Work closely with Business Owners and Subject matter expert to outline Functional Requirements and Requirement Analysis.
* Worked as QA analyst testing**AMISYS**claims processing system. This included manual testing of processing totaling several hundred per day.
* Reviewed and analyzed data from various internal sources.
* Ability to analyze data and Business Process Flow across multiple platforms like Oracle Database and Mainframe.
* Identified the impacts the HIPPA 5010 & ICD 10 project had on enrolment Claims, FEP (Medicare and Medicaid program)
* Identified gaps and performed gap analysis.
* Tested claims adjudication and group and enrollment in **Amisys** for New Medicare advantage members.
* Created Mapping Documents, Report Mock-ups and modified existing report mock-ups and finalized for development.
* Discuss with Business Team and Update the BRD to expand the functionality for the Claim Processing.
* Updated and resolved claim projects involving payment issues on**AMISYS system**
* Gather the requirements for 270/271 (Generate the 271 response as per Clients Requests on 270)
* Designed and development of test cases based on functional requirements for Institutional and Professional claims for EDI (Electronic data interchange) and HIPAA Transactions 837/835, 834, 270/271 testing.
* Thoroughly analyzed impacts to the system components (DB2 tables, copybook, and the data warehouse) in order to support the current functions, as well as prepare for updated or changed functions identified in the Business Rules Comparison.
* Created a fast track mapping document for the defects filed which help the developing team to fix those defects.
* Created Functional Requirements for the 834 enrolment files with their changed benefits in the Medicare program.
* Understand the flow of data, Reviewed and analyzed data from various sources.
* Conducting session with developing teams for the coding of functional requirement for projects.
* Studied previously created mapping document and updating them according to the new requirement.
* Assist in the research, audit, and resolve **Amisys** setup issues reported by the claims department, provider assistance center, enrollment department, PNM Coordinators and System Configuration.
* Work with testing team to create the testing scenarios, Queries, helping them to understand the logic.
* Work with developing team to solve the defects generated by the Testing team.
* Conducted UAT to confirm that all derivative products can be successfully processed through stages of the trade life cycle.
* Worked with Testing Team to solve the defects identifying during the regression testing, System testing and UAT testing.
* Uploading and Modifying document on SharePoint Site.

**Environment:** Windows XP (SP-3), Caliber, Toad-11,Toad-Data Modeler, HP Quality Center, MS Excel, MS Word, Visio, MS Power Point, SQL, DB2, SharePoint 2010.

**Celtic Healthcare, Inc. Pennsylvania Apr 07 – Sep 09**

**Business Analyst**

This project involved development of schemas as well as customization of User interface in Java Language for HIPAA ANSI x12 transactions 837,835, 270.

It also involved development of migration from Diamond software to Facets 4.0 including configurations, claims auto adjudication scope and definitions, financial transactions ID cards, Membership, and Enrollment. EDI 835, 837I, P, 270, 271 and proprietary conversions utilizing Facets extensions and development of new scripts and extensions to meet proprietary origination formats and reformat them into HIPAA standardized formats.

**Responsibilities:**

* Designed High level design, for New process, integrating with legacy and Facets
* Defined Functional Test Cases, documented, Executed test script in Facets system.
* Responsible for architecting integrated HIPAA, Medicare solutions, Facets.
* Responsible for integrating with Facets .Designing test scripts for testing of Claims in Development, Integration and production environment.
* Responsible for writing and maintaining Function Requirement Specifications (FRS), Configuration Baseline Document.
* Developed test cases based on the crosswalks and compliance guidelines for **837** Professional, Institutional and Dental claims and for **270/271 eligibility benefit inquiry** and response
* Defined Business Process aligns with Company goals and existing **HIPAA** regulation to communicate with CMS Programmatically from **Amisys system.**
* Worked closely with Information Systems Staff to improve existing Amisys Billing Systems, Membership, and Accounting functions by testing New Releases.
* Planned and documented procedures for data processing and prepared data flow diagrams for the application.
* Test Coordinator and Analyst for the **Amisys** to STAR and STAR to WGS 2.0 Accumulator Synchronization Data Conversion Project
* Involved in writing the Configuration Baseline document for Reporting Rules
* Analyzed and translated business requirements into system specifications Functional Specification Document (FSD) utilizing UML and RUP methodology
* Defined Functional Test Cases, documented, Executed test script in Facets system.
* Followed the standards of PMO which included getting approvals for SOX Compliance at various Gates.
* Selected as the primary **AMISYS** EDI programmer and earned recognition for successfully redesigning, rewriting, improving and maintaining the EDI process to more effectively meet the corporate-wide business requirements.
* Investigate to resolution extraordinary claim, eligibility, pricing, provider, **benefit**, third party liability, medical management/authorization and correspondence issues
* Prepared Functional Design Specifications employing Use case scenarios, sequence diagrams, ERD’s, DFD’s and class diagrams
* Gathered high level requirements and developed scope of the project for the implementation of Microsoft Office Share Point 2007.
* Validated the following: 837 (Health Care Claims or Encounters), 835 (Health Care Claims payment/ Remittance), 270/271 (Eligibility request/Response), 834 (Enrollment/Dis-enrollment to a health plan)
* Conducted weekly meetings for deciding the Policies and Procedures to be followed while constructing new sites.
* COC (Certificates of Coverage) and benefit plan data initial conversion and ongoing maintenance load programs, input files being multiple proprietary fixed and variable lengths file formats. This includes co-pay, deductibles, life time coverage, co-insurance etc.
* Performed the requirement analysis, impact analysis and documented the requirements using Rational Requisite Pro.
* Work closely with Business Owners and Stakeholders to outline Business Requirements.
* Work with System analyst and IS teams to understand the flow of data.
* Reviewed and analyzed data from various internal sources.
* Ability to analyse data and Business Process Flow across multiple platforms like Oracle Database and Mainframe.
* Audit Amisys set up and compare to contractual obligations as listed in provider's formal agreement
* HIPAA EDI transactions such as 835, 837 (P, D, I) 276, 277, 278.
* Facilitated needs analysis with **subject matter experts** on fulfillment, delivery and pricing/promotion
* Assisted JAD sessions to identify the business flows and determine whether any current or proposed systems are impacted by the EDI X12 Transaction, Code set and Identifier aspects of HIPAA.
* Identified gaps and performed gap analysis
* Created Mapping Documents, Report Mock-ups and modified existing report mock-ups and finalized for development.
* Helping Developing team for Data Stage jobs to extract, transform and load data into data warehouses from various sources like relational databases, application systems, temp tables, flat files etc.
* Business Requirements, Systems Requirements, Test Criteria, and Implementation to have the outputs of project dealt with the automation of correspondence directed to Insurance policy owners
* Provide technical expertise as an early engagement to different modules and enhancements to access impacts and define scope.
* Formulated logical statements of business requirements researched and evaluated alternative solutions and recommend the most efficient solution for system design.
* Review requirements and understand technical recommendations and constraints, and develop comprehensive and accurate functional specifications; Data Mapping, and process flows.
* Work with Compliance and Regulatory operations to follow and monitor different IT process bound by CMS Regulations.

**Environment:** Windows XP, Business Objects, MS Excel, Word, Visio, power point, SQL, DB2, SAS database.